BEST AVAILABLE COPY

√ PSSITION	INITIALS	IF NO.	DATE
		-	
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	a.	902	61724-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled		Appeal
÷	Restricted	0	Objected

Claim : Date	Claim	Date	Claim	Date
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B / 1/2	7.2/57 2/58	++++++	108	
		1-1-1-1-1-1	109	
6 21			110	+++++
	4/ 61		111	+++++
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	28 63		114	
16 4	23 65 U	 	115	++++
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10 10	68		118	+++++
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24	74		124	
25	75		125	
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27 / 1	77		127	
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31 / 1	81		131	
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34 1	83		133	
34 1	84		134	
35 4/	85		135	
34 1 1	86		136	
35 1 36 37 38 7	87		137	
38 1//	88		138	
	89		139	
4 12/11	90		140	
44 / 19/	91		141	
42 / //	92	 	142	++++++
42 / //	93		143	+ + + + + + + + + + + + + + + + + + +
4001	94		144	+++++
	95	++++++	145	+++++
	96		146	++++++
	97		145	
	98	 	148	
3 48	99			+
50	100		149	

If more than 150 claims or 10 actions staple additional sheet here